

March 11, 2002

**TO: Washington State Law Enforcement Agencies
3-FLAGS Participants**

**FROM: Angie Ward, Program Manager
(360) 753-0877, award@wtsc.wa.gov**

RE: Overtime Funding for “Click It Or Ticket” Enforcement Campaign

Washington State has been chosen as one of thirteen states to receive special funding for a “Click It Or Ticket” Campaign. This high-visibility seat belt enforcement campaign model has been shown to increase seat belt and child restraint use rates thereby decreasing death and serious injury on roadways across the nation. The concept is simple. It starts with a statewide public information effort to educate motorists about the upcoming seat belt enforcement wave and is followed up with an intensive period of increased enforcement through zero tolerance seat belt emphasis patrols. This combined media and enforcement effort has the potential to be the largest mobilization of law enforcement in Washington State history. The Washington Traffic Safety Commission (WTSC) will be spending a substantial amount of money on paid media spots, including television and radio public service announcements containing a clear message about the coming enforcement. These spots will air in both the week before and the week during the mobilization.

As an integral part of this mobilization, the WTSC is pleased to announce the availability of grant funds for “Zero Tolerance – Seat Belt Emphasis Patrols.” The enforcement activity will be begin on May 20 and extend through June 2, 2002. The goal of this federal grant is to save lives and prevent serious injuries on Washington’s roadways by increasing the seat belt usage rate. An average of 500 vehicle occupants are killed in Washington each year. State data shows that 60% of these people were NOT wearing seat belts, while nearly 85% of those who were unhurt in the same crashes WERE wearing seat belts. Several research studies have shown that at least half of those who died could have been saved if they had been wearing seat belts. The WTSC conservatively estimates that over 150 lives a year could be saved in Washington, and at least twice that many serious injuries prevented, if everyone buckled up.

1) Eligibility –

All state, county, local and tribal law enforcement agencies are eligible and encouraged to participate in this project. The use of commissioned reserve officers is approved as long as a pay structure exists. Funding availability is on a first-come basis based on agency size and the number of full-time commissioned personnel as follows:

<u># of Commissioned Officers</u>	<u>May request funding up to:</u>
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1-10	\$1,000
11-25	\$2,000
26-50	\$3,000
51-100	\$3,500
101 +	\$5,000

2. *Funding Guidelines -*

Funding will be on a “reimbursement” basis and require submission of a State invoice voucher (Form A-19 – attached) upon completion of activity. Support documents for reimbursement must include signed overtime slips or payroll/expense records showing payments made, officer activity logs demonstrating performance, and a completed post-mobilization 100-car seat belt survey.

- ?? ***Performance standards*** for funded personnel are a minimum of **three (3) self-initiated contacts per hour funded with a “desired outcome” of three (3) seat belt citations per hour.** This is an enforcement activity with “zero tolerance” for seat belt violations. It is expected that Notices of Infraction (NOI’s) will be issued at contact unless circumstances dictate otherwise. It is understood that violator contacts may result in related, time-consuming activity. Such activity will be considered for reimbursement. Activity other than that initiated through emphasis patrol contact (investigating collisions, emergency responses, etc) will be the responsibility of the contracting agency and may not be considered for reimbursement.
- ?? ***Allowable use of funds*** will be for overtime salary (@ 1.5 times normal rate), and wages and benefits of commissioned personnel in direct support of operational activity. No equipment purchases are authorized.

3) *Application for Funds –*

Application for funding must be received by WTSC by **May 1, 2002** must include the following elements:

a. **A grant letter requesting overtime funding.** The letter must contain the following three elements (See attached sample letter):

- ?? A schedule of planned enforcement dates during the May 20 – June 2 Mobilization (May be changed later due to operational requirements) and the number of personnel committed to each date.
- ?? The amount of funds requested
- ?? The designation of a single “point of contact” for the purposes of the project management, administration and activity reporting.
- ?? The designation of a single “point of contact” for media and public education purposes. (May be the same as the project manager)

b. **A signed Memorandum of Understanding** (attached)

c. **A completed 100-car pre-event baseline seat belt survey** (attached) from within the applicant agency’s jurisdiction.

4. Funding Approval –

A copy of the approved MOU will be returned to your agency prior to planned activity.

5. Reimbursement/Reporting -

To receive reimbursement, the following must be submitted to WTSC **no later than June 21, 2002:**

- ?? A Completed Invoice Voucher, A19-1A Form (attached). Please note that we cannot accept a FAX. **We must have your agency identified as the “Claimant”, a Federal Tax ID # and an original signature of the agency head, command officer or contracting officer on the A-19 form.**
- ?? Payroll support documents such signed overtime slips or payroll/expense records showing rate of pay or payments made
- ?? A summary of contacts (attached), number of citations and arrests (by type) for each day of the mobilization
- ?? Post-event 100 car observational survey of seat belt use (attached). These surveys do not need to be conducted by law enforcement personnel.

Important Note: This information will be used for a report to Congress on the national activity. Information received past the June 21st deadline cannot be included and is therefore not reimbursable!

6) Contact Information/Questions -

Please contact me at (360) 753-0877 or email award@wtsc.wa.gov if you have any questions.

Attachments: Memorandum of Understanding
Activity Log
A-19 Invoice Voucher
Two 100-car seat belt survey forms (pre and post)
Sample grant request letter



MEMORANDUM OF UNDERSTANDING

WASHINGTON TRAFFIC SAFETY COMMISSION
1000 So. Cherry St., PO Box 40944, Olympia, WA 98504-0944

THIS AGREEMENT is made and entered into by and between:

Agency name

Hereinafter referred to as "Contractor" and the WASHINGTON TRAFFIC SAFETY COMMISSION,
hereinafter referred to as "WTSC"

IT IS THE PURPOSE OF THIS AGREEMENT to provide overtime funding to law enforcement agencies to conduct **"Zero Tolerance – Safety Belt Emphasis Patrols"** during the period between May 20th and June 2nd, 2002. The goal of this project is to contact as many violators as possible with a "Zero Tolerance" for seat belt violations

IT IS, THEREFORE, MUTUALLY AGREED THAT::

1. Contractor will provide a commissioned police officer (active or paid reserve) with appropriate equipment (vehicle, radar, etc) on an "overtime" basis (not to exceed 1.5 times normal salary) to enforce seat belt laws. No on-duty personnel will be funded.
2. The period of activity will begin on May 20 and extend through 2 June, 2002. Funding is not available for activity before or after this period and funding may not exceed the amount prescribed in the attached Request for Proposal
3. Performance standards for funded personnel are **a minimum of three (3) self-initiated contacts per hour funded with a "desired outcome" of three (3) seat belt citations per hour.** This is an enforcement activity with "zero tolerance" for seat belt violations. It is expected Notices of Infraction (NOI's) will be issued at contact unless circumstances dictate otherwise. It is understood that violator contacts may result in related, time consuming activity. Such activity will be considered for reimbursement. Activity other than that initiated through emphasis patrol contact (investigating collisions, emergency responses, etc) will be the responsibility of the contracting agency and may not be considered for reimbursement.
4. Contractor must submit for **reimbursement not later than June 21, 2002.** Billings will include:
 - ? ? Invoice Voucher, A19-1A Form (attached) Please note that we cannot accept a FAX. We must have your agency identified as the "Claimant", a Federal Tax ID # and an original signature of the agency head, command officer or contracting officer on the A-19 form.
 - ? ? Payroll support documents (overtime slips, payroll documents, etc)
 - ? ? Officer worksheets (showing 3 or more self-initiated contacts per hour)
 - ? ? Post-event 100-car seat belt survey
5. Disputes arising under this agreement shall be resolved by a panel consisting of one representative of the Washington Traffic Safety Commission, one representative from your agency and a mutually agreed upon third party. The dispute panel shall thereafter decide the dispute with the majority prevailing.
6. Either party may terminate this agreement upon (30) days written notice to the other party. In the event of termination of this agreement, the terminating party shall be liable for the performance rendered prior to the effective date of termination.

IN WITNESS WHEREOF, PARTIES HAVE EXECUTED THIS AGREEMENT.

APPROVED/DISAPPROVED

Agency

Contracting Agent (Print/type Name)

Signature

Washington Traffic Safety Commission

Return to:

WTSC

PO Box 40944

Olympia, WA 98592-0944

SAMPLE GRANT REQUEST LETTER

April XX, 2002

Angie Ward
Occupant Protection Program Manager
Washington Traffic Safety Commission
PO Box 40944
Olympia, WA 98504-0944

Dear Angie,

The **ABC Police Department** is requesting to participate in the Commission's "Click It Or Ticket" seat belt overtime enforcement project from May 20 through June 2, 2002. Our agency is requesting **\$2,000** (based on the formula included in the grant announcement) and anticipates providing **50** hours of seat belt overtime on the following dates:

May 20 – 2 Officers, 4 hours each = 8 hours
May 22 – 3 Officers, 5 hours each = 15 hours
May 28 – 3 Officers, 5 hours each = 15 hours
June 1 – 1 Officer, 2 hours = 2 hours
June 2 – 2 Officers, 5 hours each = 10 hours
50 hours total

We have designated **Sergeant Bob Jones** as the single point of contact for the purposes of the management, administration and activity reporting associated with this grant. His/Her contact information is as follows: ***Title, Address, Phone, Fax, Email.***

We have designated **Sergeant Jane Smith (if different from above)** as the single point of contact for the purposes of media and public education. His/Her contact information is as follows: ***Title, Address, Phone, Fax, Email.***

I understand that in order to receive reimbursement our department must submit a completed A-19 invoice voucher, payroll support documents, completed activity logs, and a post-event 100-car seat belt observational survey **no later than June 21, 2002.**

We have signed and attached the Memorandum of Understanding (MOU) and our pre-event 100- car survey and look forward to receiving a confirmation letter and copy of the fully executed MOU from your office by May 10, 2002.

Sincerely,

Chief of Police



SEAT BELT EMPHASIS PATROL ACTIVITY LOG

AGENCY: _____

OFFICER: _____

DATE: _____

HOURS: _____

Total Number of Contacts	
Seatbelt NOIs	
Child Passenger Restraint NOIs	
Total NOIs	
Criminal Citations	
Alcohol related arrests (DUI, MIP, open container, Neg 1, etc.)	
Drug related arrests (paraphernalia, intent to distribute, possession, etc)	
Other Custodial Arrests	

Notes:

This form (or equivalent) must be submitted to WTSC with agency requests for payment/reimbursement

100 – CAR OBSERVATIONAL SURVEY

DATE: _____ TIME: _____

PRE-MOBILIZATION _____

OBSERVER _____

POST-MOBILIZATION _____

AGENCY: _____

(check one of the above)

LOCATION: _____

	YES	NO		YES	NO		YES	NO		YES	NO
1			26			51			76		
2			27			52			77		
3			28			53			78		
4			29			54			79		
5			30			55			80		
6			31			56			81		
7			32			57			82		
8			33			58			83		
9			34			59			84		
10			35			60			85		
11			36			61			86		
12			37			62			87		
13			38			63			88		
14			39			64			89		
15			40			65			90		
16			41			66			91		
17			42			67			92		
18			43			68			93		
19			44			69			94		
20			45			70			95		
21			46			71			96		
22			47			72			97		
23			48			73			98		
24			49			74			99		
25			50			75			100		


TOTALS: YES _____ NO _____ TOTAL PERCENTAGE USAGE: _____

REMEMBER: PRE AND POST SURVEYS MUST BE DONE AT THE SAME LOCATION, ON THE SAME DAY OF THE WEEK AND AT THE SAME TIME OF DAY. Observations are of driver shoulder belt use, (and front outboard passenger shoulder belt use when possible). Observations should be done in high traffic, low speed limit locations.

Send the PRE 100-car survey form with the department's initial application packet. Send the POST 100-car survey with the department's A-19 request for reimbursement and activity logs. Send both of these to:

WTSC
Attn: Angie Ward
P. O. Box 40944
Olympia, WA 98501-0944

FORM
A 19-1A
(Rev. 5/91)



STATE OF WASHINGTON
INVOICE VOUCHER

AGENCY USE ONLY		
AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.
2280		

AGENCY NAME

Washington State Traffic Safety Commission
1000 South Cherry Street
P. O. Box 40944
Olympia, WA 98504-0944

VENDOR OR CLAIMANT (Warrant is to be payable to)

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate: I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY _____
(SIGN IN INK)

(TITLE)

(DATE)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For reporting Personal Services Contract Payments to I.R.S.)										RECEIVED BY				DATE RECEIVED			
DATE	DESCRIPTION										QUANTITY	UNIT PRICE	AMOUNT	FOR AGENCY USE			
PREPARED BY					TELEPHONE NUMBER			DATE		AGENCY APPROVAL				DATE			
DOC. DATE		PMT DUE DATE		CURRENT DOC. NO.		REF. DOC.		VENDOR NUMBER			VENDOR MESSAGE				UBI NUMBER		
REF DOC SUF	TRANS CODE	M O N	FUND	MASTER INDEX APPN INDEX PROGRAM INDEX		SUB OBJ	SUB SUB OBJECT	ORG INDEX	WORKCLASS ALLOC	COUNTY BUDGET UNIT	CITY/TOWN MOS	PROJECT	SUB PROJ	PROJ PHAS	AMOUNT	INVOICE NUMBER	
ACCOUNTING APPROVAL FOR PAYMENT							DATE							WARRANT TOTAL		WARRANT NUMBER	